

| UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA CAND 435 (CAND Rev. 08/2018) | | TRANSCRIPT ORDER Please use one form per court reporter. CIA counsel please use Form CIA24 Please read instructions on next page. | | | | | | | | COURT USE ONLY DUE DATE: | | | | |
|--|--|--|--------------|--|----------------------|---------------------|--|--|---------------------------------|---------------------------------|---------------------|-------------------|----------|--|
| 1a. CONTACT PERSON FOR THIS ORDER Donna Gilliland | | 2a. CONTACT PHONE NUMBER (415) 442-1848 | | | | | | 3. CONTACT EMAIL ADDRESS donna.gilliland@morganlewis.com | | | | | | |
| 1b. ATTORNEY NAME (if different) Susan D. Resley | b. ATTORNEY PHONE NUMBER 415) 442-1351 | | | | | | 3. ATTORNEY EMAIL ADDRESS susan.resley@morganlewis.com | | | | | | | |
| 4. MAILING ADDRESS (INCLUDE LAW FIRM NAME, IF APPLICABLE) Morgan Lewis & Bockius LLP 1 Market, Spear Street Tower San Francisco, CA 94102 | | | | 5. CASE NAME USA v. Lynch 8. THIS TRANSCRIPT ORDER IS FOR: | | | | | | 6. CASE NUMBER CR-18-00577 | | | | |
| 7. COURT REPORTER NAME (FOR FTR, LEAVE BLANK AND CHECK BOX)→ ☐ FTR Belle Ball | | | | ☐ APPEAL ☐ CRIMINAL ☐ In forma pauperis (NOTE: Court order for transcripts must be attached) ☐ NON-APPEAL ☐ CIVIL CJA: <u>Do not use this form; use Form CJA24</u> . | | | | | | | | | | |
| 9. TRANSCRIPT(S) REQUESTED (Specify portion(s) and | d date(s) of proceeding | g(s) for which t | ranscript is | s requested |), format(s) & | & quantity an | d delivery | type: | | | | | | |
| | | | | FORMAT(S) (NOTE: ECF access is included rchase of PDF, text, paper or condensed.) | | | | | VERY TYPE (Choose one per line) | | | | | |
| DATE JUDGE TYPE (e.g. CMC) If reque specify p | PORTION sting less than full hearing, portion (e.g. witness or time) | PDF (email) | (email) | PAPER | CONDENSED (email) | ECF ACCESS (web) | ORDINARY (30-day) | 14-Day | EXPEDITED (7-day) | 3-DAY | DAILY (Next day) | HOURLY (2 hrs) | REALTIME | |
| 02/04/2019 CRB Status | | | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | • | 0 | 0 | |
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| | | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | |
| 10. ADDITIONAL COMMENTS, INSTRUCTIONS, QUESTIONS, ETC: | | | | | | | | | | | | | | |
| ORDER & CERTIFICATION (11. & 12.) By signing below, I certify that I will pay all charges (deposit plus additional). 11. SIGNATURE /s/ Susan D. Resley | | | | | | | | | 12. DATE 02/13/2019 | | | | | |

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